PTO/SB/06 (12-04)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a

PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number													number	
Substitute for Form PTO-875											Application or Docket Number			
APPLICATION AS FILED - PART I														
(Column 1			Column 1)		(0	Column 2)	SMALL ENTITY			0	R	OTHER THAN SMALL ENTITY		
BA	FOR SIC FEE	NO.	NUMBER FILED			NUMBER EXTRA		RATE (\$)	FEE (.,				
(37	CFR 1.16(a), (b), or	(c))						7.7	1	*'	-	RATE (\$)	FI	EE (\$)
(37	ARCH FEE CFR 1.16(k), (i), or (m))									-			
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))		(q))				 _	\exists				-		-	
(37	TAL CLAIMS CFR 1.16(i))		minus	20 = .			ᅱ				-			
IM	DEPENDENT CLA	IMS						Х	=	OF	₹ X	· =		
		If the s	minus 3 =			drawings exceed 100		Х :	=		×	. ≂		
AP FE	PLICATION SIZE	sneets	sheets of paper, the ap is \$250 (\$125 for small			siza foo du							1	
	CFR 1.16(s))	additio) (\$125 for nal 50 she	small ent ets or fra	illy) for	reach							1	
additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								I			1.			
MU	LTIPLE DEPEND	ENT CLAIM PR	ESENT (37	CFR 1.16(j)))					-				
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL	 	-	i_		 	
				· OTTIE	L			TOTAL	L					
APPLICATION AS AMENDED - PART II 3-11-56 (Column 1) (Column 2) (Column 2)														
		100,0,111 ()		(Colui		(Column)	3)	SMALL	ENTITY	OF	₹ .		R THAN	
AMENDMENT A		CLAIMS REMAINING		HIGHE		PRESEN	r	RATE (\$)	T		L	SMALL	FULL	<u> </u>
		AFTER AMENDMENT	.	PREVIO PAID F		EXTRA		THATE (S)	ADDI-			RATE (\$)	AD TIOI	DI-
	Total (37 CFR 1.16(i))	12	Minus	2	D	= \$	1	X =	FEE (\$)		-	-	FEE	
	Independent (37 CFR 1.16(h))		Minus	•••	3	= 8	1	1	 	OR	×	<u></u>	<u> </u>	
	Application Size Fee (37 CFR 1.16(s))						7	X	\	OR.	×	=	λ_{-}	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							·	1		-		-	
				TOTAL	<u> </u>	OR		TAL						
		(0.1		ADD'L FEE		OR		D'L FEE		<u> </u>				
_		(Column 1) CLAIMS)											
AMENDMENT B	•	REMAINING AFTER		HIGHE	ER :	PRESENT		RATE (\$)	ADDI-	7		1475 (1)		
		AMENDMENT		PREVIOU PAID F	JSLY OR	EXTRA		- (*/	TIONAL	1	"	RATE (\$)	ADC TION	
	Total (37 CFR 1.16(i))	·	Minus	**		=	7 /	<u> </u>	FEE (\$)	-			FEE	(\$)
	Independent (37 CFR 1,16(h))	•	Minus	•••		=	1.1	X =		OR	×			
	Application Size	Fee (37 CFR 1.	16(s))			<u> </u>	┨╏	X =		OR	х	=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))										-	-			
	,	· · · · · · · · · · · · · · · · · · ·					ן נ			OR				
AC A										OR	TOT	AL D'L FEE		7
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".														
	If the "Highest Nun The "Highest Nun	mber Previously	Paid For I	N THIS SP	ACE is	less than 3,	r, ente enter "	r=20". 3".						
.:-	Heating of the	Stidusiy	alu i UI (I	utal of Inde	pende	nt) is the hint	iest o	mher found in a						ı

The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. P.O. Box 1450, Alexandria VA 22313-1450. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.